

## UNITED STATES DISTRICT COURT

for the

District of Minnesota

United States of America,

*Plaintiff,*

v.

Case No. 0:20-cr-00129-NEB-HB(Dft 1)

Samuel Elliott Frey,

*Defendant.***ARREST WARRANT**

To: Any authorized law enforcement officer

***YOU ARE COMMANDED*** to arrest and bring before a United States magistrate judge without unnecessary delay*(name of person to be arrested)* Samuel Elliott Frey,

who is accused of an offense or violation based on the following document filed with the court: ( ) Order of Court  
 ( ) Indictment ( ) Superseding Indictment ( ) Information ( ) Superseding Information ( ) Complaint  
 ( ) Probation Violation Petition ( ) Supervised Release Violation Petition (X) Pretrial Violation Petition

This offense is briefly described as follows:  
 Violation of Pretrial Release

*K. Fogarty*Date: October 29, 2020

Kate M. Fogarty, Clerk of Court

City and state: Minneapolis, MN*Printed name and title****Return***

This warrant was received on *(date)* \_\_\_\_\_, and the person was arrested on *(date)* \_\_\_\_\_  
 at *(city and state)* \_\_\_\_\_.

Date: \_\_\_\_\_

*Arresting officer's signature**Printed name and title*

*This second page contains personal identifiers provided for law-enforcement use only  
and therefore should not be filed in court with the executed warrant unless under seal.*

*(Not for Public Disclosure)*

Name of defendant/offender: Samuel Elliott Frey

Known aliases: \_\_\_\_\_

Last known residence: \_\_\_\_\_

Prior addresses to which defendant/offender may still have ties: \_\_\_\_\_

Last known employment: \_\_\_\_\_

Last known telephone numbers: \_\_\_\_\_

Place of birth: \_\_\_\_\_

Date of birth: \_\_\_\_\_

Social Security number: \_\_\_\_\_

Height: \_\_\_\_\_ Weight: \_\_\_\_\_

Sex: \_\_\_\_\_ Race: \_\_\_\_\_

Hair: \_\_\_\_\_ Eyes: \_\_\_\_\_

Scar, tattoos, other distinguishing marks: \_\_\_\_\_

History of violence, weapons, drug use: \_\_\_\_\_

Known family, friends, and other associates (*name, relation, address, phone number*): \_\_\_\_\_

FBI number: \_\_\_\_\_

Complete description of auto: \_\_\_\_\_

Investigative agency and address: \_\_\_\_\_

Name and telephone numbers (office and cell) of pretrial services or probation officer (*if applicable*): \_\_\_\_\_

Date of last contact with pretrial services or probation officer (*if applicable*): \_\_\_\_\_